U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved
Office of Management
and Budget
No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U -	2. Fiscal Year Covered From:		
Suppliered Market on Market and Art.	1 / 1 / 2004 Through: 12 / 31 / 2004		
Name and address of person filing.	4. Name, file number, and address of labor organization.		
Name Jerry L L Lewis	Name Sheet Metal Workers Local #2		
	Labor Organization File Number		
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any		
Street 7200 W 54th St.	Street 2902 Blue Ridge Blvd.		
City Overland Park	City Kansas City		
State Kansas ZIP Code + 4 66202	State Missouri ZIP Code + 4 64129		
5. Position in labor organization. Business Representative			
A. Held an interest in, engaged in transactions (including loans) with, or of monetary value from an employer whose employees your organization. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any:	lerived income or other economic benefit of in represents or is actively seeking to represent. 7.a. Nature of interest, Transaction, or Income.		
P.O. Box, Bldg., Room No., if any	7.b. Amount.		
Street City State ZIP Code + 4			
Sign	ature		
15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompany) undersigned's knowledge and belief, true, correct, and complete. (See the sec	ng documents), has been examined by the signatory and is, to the best of the		
Signed Suf J. Jew	On 8-3-05 816-918-4982 Date Telephone Number		

Name of Person Filing Jerry Lewis		File Number U-		
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
8. Name and address of Business (including trade name, if any). Name UBS Trade Name, if any: P.O. Box, Bldg., Room No., if any Street One Ward Parkway, Suite 126 City Kansas City State Missouri ZIP Code + 4 64112	9. Business deals with: X a. Labor Organization b. Trust c. Employer 11.a. Nature of such dealing. UBS Logo pullover wind shirt given to Labor/ Management Trustees. 11.b. Approximate dollar value of such dealing. \$59 12.a. Nature of interest held or income received. UBS provides services on our 401K Plan.			
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Sheet Metal Local #2 401K Plan Trust Trade Name, if any: P.O. Box, Bldg., Room No., if any				
Street 2902 Blue Ridge Blvd City Kansas City State Missouri ZIP Code + 4 64129				
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money	12.b. Amount.			
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	14.a. Nature of payment.			
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	Q		